

OVERSIGHT OF MANAGED CARE

Consensus Overview by State Agencies

	Primary Regulatory Authority			Primarily Purchaser Roles (except federal ERISA oversight)			
	OIC	DOH	Other	DSHS	HCA	Federal Government	Private Purchasers, Accreditors & Associations
FINANCE AND ORGANIZATION							
Solvency, reserves	R			P	P	R	P,V
Pricing (including rating)	R	I		P	P	P	P
Mergers and acquisitions			R				
BENEFITS	R	I		P	P	P	P,V
PROVIDERS							
Facility health and safety		R		R,P	P	P	P,V
Practitioner credentials/licensing		R		P	P	P,I	P,V
Provider selection and termination				P	P		
Provider contracting	R	I		P	P		
Network adequacy	R			P	P		
Access standards and data about access	R	I		P	P		P,V
CONSUMER RIGHTS							
Consumer information/disclosure	R,I	R,I		P	P		P,V
Grievances and appeals	E,I	R,V		P	P		P,V
Antidiscrimination	R	R,V		P	P	R	P,V
Confidentiality of records- plans				P	P	R	P,V
Confidentiality of records- providers		R		P	P		
QUALITY (see also providers)							
Clinical quality review, audit/UM				P	P		P,V
Quality improvement structure and process		V		P	P		P,V
Consumer satisfaction				P,I	P,I		P,V,I
Quantitative quality measures		V,I		P,I	P,I	P	P,V,I
Practice Guidelines		V,I		P	P	V,I	V

KEY: R = Regulatory Roles V = Voluntary Standards
P = Purchaser Roles I = Informational Roles

